P02000109016

Department of State Division of Corporations P. O. Box 6327 Tallabassee, FL 32314

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SUBJECT:	TAI	TAMPAHISPANA.COM, INC.				
SOBJECT.		(PROPOSED CORPORATE NAMÉ - MUST INCLUDE SUFFIX)				
Enclosed is a	n origin	al and one(1) copy of the artic	les of incompantion and a	a chaola for a		
☐ \$70.00 Filing Fee		S \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status		
	FROM:	VICTOR GAMEZ			ı	
		Name (Printed or typed)				
		4447 HIDDEN SHADOW		02 0 SECRE		
		Address TAMPA FL 33614 City, State & Zip (813) 310-9550		OCT 10 AM 10: 23 RETARY OF STATE AHASSEE, FLORIDA	FILED	
		Daytime T				

NOTE: Please provide the original and one copy of the articles.

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

ARTICLE I NAME

The name of the corporation shall be:

02 OCT 10 AM 10: 23 SECRETARY OF STATE TALLAHASSEE, FLORIDA

Date

TAMPAHISPANA.COM, INC.

PRINCIPAL OFFICE ARTICLE II

The principal place of business/mailing address is: 4447 HIDDEN SHADOW

TAMPA FL 33614

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PUBLISHING MEDIA

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

VICTOR GAMEZ

4447 HIDDEN SHADOW. TAMPA FL 33614

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

VICTOR GAMEZ 4447 HIDDEN SHADOW **TAMPA FL 33614**

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is: VICTOR GAMEZ 4447 HIDDEN SHADOW

TAMPA FL 33614

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar w th and agreet the appointment as registered agent and agree to act in this capacity Signature/Registered Agent Date Signature/Incorporator